

www.mass.gov/rmv

Mail To:

R.M.V. P.O. Box 199100 Boston, MA 02119-9100 ATTN: Rebate Section

Rebate/Refund Application

Rebates are issued in accordance with Mass. G.L. Chapter 90, Section 2.

Full Refund of the registration fee applies if the registration is canceled within ten days of the registration effective date.

Partial Refund for 1/2 of the amount in excess of \$15 applies if the registration is canceled prior to the first day of the seventh month following the effective date appearing on the certificate of registration.

Example: Registration effective June 1, 2003 - Fee \$41.00

Plates returned before January 1, 2004

Rebate = 1/2 of excess over \$15 (\$41 less \$15 = \$26)

Rebate will be \$13.00

Registration Type(check one): Passenger	Commercial	Trailer
Semi-trail	Bus Othe	r (Please specify)
Registration Number		License Number
Name		Telephone ()
Street		
City, State, & Zip		
Reason for rebate/refund reques	t	
	your license number and an ex	be issued for driver licenses. However, if you believe planation of the overpayment on the appropriate lines f this application for additional space.
* For Regi	stry use ONLY - Please, o	do not write in this space *
Reg Amount: \$	Date of Cancellation: _	Approved by:
Effective Date:	Rebate Amount: \$	Date Approved: